

## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| maintenance fee notification   | is.   | D.OOK 1, 0) (a   | , speenying  | u 11011 00   | pondenov zazroso  | , and or (b) mareating a sep   | TEL ADDICESS 101  |
|--|---|--|--|--|---|--|---|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)   |   |  |  |  | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |  |   |
| 00466 75   | 590 01/19/2006  |  |  |  | have its own certificat   | te of mailing or transmission.   | ent of format drawing, must   |
| YOUNG & THO<br>745 SOUTH 23RD<br>2ND FLOOR   | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |  |  |  |   |  |   |
| ARLINGTON, VA  |   | 1  | transmitted to the USI   | PTO (571) 273-2885, on the                                   |   |  |   |
|  |   |  |  |  |   |  | (Depositor's name)  |
|  |   |  |  |  |   |  | (Signature)   |
|  |   |  |  |  |   | ····   | (Date)  |
| APPLICATION NO.  | FILING DATE   |  | FIRST NAME   | D INVEN  | TOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.  |
| 10/044,527   | 01/11/2002  | Marie-Hele   |  | ene Sani   | 27.   | <del>*3-1032-183</del>   | 2824  |
| TITLE OF INVENTION: S'   | WEET WITH A ROUGH TI  | EXTURE INTEND  | DED FOR TH   | IE TREA  | TMENT OF HALITO   | sis 0600-/0  | 36  |
| APPLN, TYPE  | SMALL ENTITY  | ISSUE F  | EE   | PU   | BLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE  |
| nonprovisional   | МО  | \$1400   | \$1400   |  | \$300   | \$1700   | 04/19/2006  |
| EXAMINER   |   | ART UNIT   |  | · CL   | ASS-SUBCLASS  | ]  |   |
| WEBMAN, EDWARD J   |   |  |  |  | 424-440000  | _  |   |
| 1. Change of correspondence<br>CFR 1.363).   | 2. For printing on the patent front page, list  YOUNG & THOMPSON  |  |  |  |   |  |   |
| ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.   |   |  | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  |  |   |  |   |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  |   |  | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |  |   |  |   |
| 3. ASSIGNEE NAME AND   | RESIDENCE DATA TO B   | E PRINTED ON T   | HE PATENT  | T (print o   | r type)   | *****  |   |
| PLEASE NOTE: Unless recordation as set forth in  | an assignee is identified be 37 CFR 3.11. Completion  |  |  |  |   | nee is identified below, the   |   |
|  |   |  | B) RESIDENCE: (CITY and STATERS ALGORITHM STEELS 00000120 10044527   |  |   |  |   |
| ROQUETTE FRERES  |   |  | Lestrem, FRANCE 01 FC: 02 FC:  |  |   |  | 1400.00 OP<br>300.00 OP   |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🔲 Government                      |   |  |  |  |   |  |   |
| 4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):   |   |  |  |  |   |  |   |
| Issue Fee  |   |  | A check in the amount of the fee(s) is enclosed.   |  |   |  |   |
| Publication Fee (No small entity discount permitted)   |   |  | Payment by credit card. Form PTO-2038 is attached.   |  |   |  |   |
| Advance Order - # of   | $\square$ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $25-0120$ (enclose an extra copy of this form).   |  |  |  |   |  |   |
| 5. Change in Entity Status   | (if necessary)  |  |  |  |   |  |   |
|  | MALL ENTITY status. See   |  |  |  | <del> </del>  | LL ENTITY status. See 37 C   |   |
| The Director of the USPTO<br>NOTE: The Issue Fee and P<br>Interest as shown by the reco  | is requested to apply the Issu<br>ublication Fee (if required) vords of the United States Pate  | ue Fee and Publicat<br>vill not be accepted<br>ent and Trademark                         | tion Fee (if and<br>I from anyone<br>Office.   | ny) or to r<br>e other th                                    | e-apply any previousl<br>an the applicant; a reg  | ly paid issue fee to the application istered attorney or agent; or t   | ation identified above.<br>he assignee or other party in  |
| Authorized Signature   | Benoît Cas  | tel  |  |  | Date Ap:  | ril 10, 2006   |   |
| Typed or printed name Benoit CASTEL #35,04   |   |  |  | -  | Registration  |  | <del></del>   |
| This collection of informatic<br>an application. Confidentialis<br>submitting the completed ap<br>this form and/or suggestions<br>Box 1450, Alexandria, Virgi<br>Alexandria, Virginia 22313- | on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. placation form to the USPT for reducing this burden, stain 22313-1450. DO NOT 1450.   | 11. The information 122 and 37 CFR O. Time will vary could be sent to the SEND FEES OR C | n is required<br>1.14. This col<br>depending up<br>Chief Inform<br>COMPLETED   | to obtain<br>llection is<br>pon the ir<br>nation Of<br>FORMS | or retain a benefit by the estimated to take 12 idividual case. Any conficer, U.S. Patent and TO THIS ADDRESS   | the public which is to file (an<br>minutes to complete, includio<br>mments on the amount of ti<br>Trademark Office, U.S. Dep<br>S. SEND TO: Commissioner | d by the USPTO to process) ag gathering, preparing, and me you require to complete aartment of Commerce, P.O. for Patents, P.O. Box 1450, |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.